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03/16/2004

Pandiscio & Pandiscio
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James A. Sheridan	(Depositor's name)
<i>James A. Sheridan</i> 6/16/04	(Signature)
June 16, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/046,453	10/19/2001	Frederic P. Field	ONUX-16	4028

TITLE OF INVENTION: SURGICAL SUTURING INSTRUMENT AND METHOD OF USE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	06/16/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
JACKSON, GARY	3731	606-148000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Onux Medical, Inc.

Hampton, New Hampshire

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
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(Date)

James A. Sheridan 06/16/2004

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06/22/2004 DENMANU2 00000069 10046453

01 FC:2501
 02 FC:1504

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